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| SERIAL NUMBER 10/825,381 | FILING OR 371(c) DATE 04/15/2004 RULE | CLASS 600 | GROUP ART UNIT 3766 | ATTORNEY DOCKET NO. 146461 (5024-00123) |
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APPLICANTS

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** CONTINUING DATA ***** CHZ
 NONE 4/29/06

** FOREIGN APPLICATIONS *****
 NONE 9/29/06 CHZ

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/25/2004

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|---|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY WI | SHEETS DRAWING 3 | TOTAL CLAIMS 28 | INDEPENDENT CLAIMS 5 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance | | | | |
| Verified and Acknowledged <i>Carl H. Dorsey</i> Examiner's Signature Initials | | | | |

ADDRESS

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TITLE

System and method for correlating sleep apnea and sudden cardiac death

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|------------------------------------|---|---|
| FILING FEE RECEIVED 1216 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____ |
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